

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 02, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90138 024 \*\*\*150.00

**DOCUMENT # P95000058278**

1. Entity Name

**PIRANHA PROPERTIES, INC.**

Principal Place of Business

**7100 NW 100 TER  
 FORT LAUDERDALE FL 33321  
 US**

Mailing Address

**7100 NW 100 TER  
 FORT LAUDERDALE FL 33321  
 US**

2. Principal Place of Business

**32 SW 5th AVE**

3. Mailing Address

**32 SW 5th AVE**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Delray Beach, FL**

City & State

**Delray Beach, FL**

4. FEI Number

**65-0603376**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**HIGGINBOTHAM, SHARON  
 7100 NW 100 TERRACE  
 FORT LAUDERDALE FL 33321**

7. Name and Address of New Registered Agent

Name

**32 SW 5th Avenue**

**Delray Beach**

**FL**

**33444-1512**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **Sharon Higginbotham**

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

**4-17-02**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete  
 NAME **HIGGINBOTHAM, SHARON**  
 STREET ADDRESS **7100 NW 100 TERR**  
 CITY-ST-ZIP **FORT LAUDERDALE FL 33321**

TITLE **V** ☐ Delete  
 NAME **BENT, DWAN**  
 STREET ADDRESS **581 ANCHOR PT**  
 CITY-ST-ZIP **DELRAY FL 33444**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
 NAME **Higginbotham - Restrepo, Sharon**  
 STREET ADDRESS **3800 Washington Rd #1205**  
 CITY-ST-ZIP **West Palm Beach, FL 33405**

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Sharon Higginbotham**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/17/02**

Date

**1561-819-1900**  
 Daytime Phone #

CR2E034 (9/01)